

**INTEGRATED GOVERNANCE & AUDIT COMMITTEE MEETING
NORTH EAST LINCOLNSHIRE CLINICAL COMMISSIONING GROUP
HELD ON FRIDAY 19th July 2019 AT 9AM
MO.2.25 MUNICIPAL OFFICES, GRIMSBY**

PRESENT


Mr Tim Render	Chair & Governing Body lay member
Mr Joe Warner	Governing Body lay member
Dr Karin Severin	GP Member
Cllr Margaret Cracknell	Union Board Lay Member

IN ATTENDANCE

Ms Laura Whitton	Chief Finance Officer
Mr Rob Walker	Senior Manager, Mazars
Mrs Jan Haxby	Director of Quality & Nursing
Ms Debbie Baker	Group Auditor, NL Business Connect
Ms Sue Kendall	Group Audit Manager, AuditOne
Mrs Jan Haxby	Director of Quality - SIRO
Ms Jeanette Harris	Governance Support Officer
Karen Stamp	Exec Office PA (note taker)

APOLOGIES

Mr Mark Kirkham	Partner, Mazars
Mrs Claire Stocks	Governance Assurance Officer
Mr Peter Hanmer	Head of Audit and Assurance, NL Business Connect
Mr Ian Wallace	Managing Director, AuditOne

1. **Apologies**
Apologies were noted as above.
2. **Declarations of Interest**

Conflicts of Interest.docx

There were no declarations of interest made by those present.
3. **Minutes of the previous meeting – 29.03.19 & 22.05.19**
The minutes were agreed as an accurate record for both meetings.
4. **Matters Arising – 29.03.19**
The Matters Arising sheet was discussed and all updates were noted. The following points were also discussed:

Item 4 - Terms of Reference
Mr Render explained that FutureGov are doing some work on the Union Operating Model, which may affect the CCG's Committee structure. The Terms of Reference will be brought back

to the next meeting for discussion. **ACTION: AGENDA K STAMP**

KS

Item 4 – ICP development

This will be added to the December meeting agenda and Ms Whitton agreed to circulate some slides that she had done for a workshop to give members a better understanding. **ACTION: L Whitton**

LW

Item 4 - Counter Fraud Update

K Stamp was asked to chase a response from Mr Tait on the counter Fraud Update **ACTION: K Stamp**

KS

Item 4 - Medium Term Financial Plan

Work is underway on this linked to the national planning timetable. The CCGs plan needs to align with:-

- Place Plan for North East Lincolnshire
- Union Plan
- Northern Lincolnshire System Plan
- HCV STP Plan

A lot of work is going on to ensure these plans are aligned and it was agreed to bring this back to the September Audit Committee as this aligns with the STP / national deadline. **ACTION: Agenda K Stamp**

KS

Item 4 – SEND Report

It was noted that this is a partnership inspection whilst the council leads Children’s services, the CCG play a huge part.

5. Risk Register/ BAF Update (including Assurance framework report) & feedback from GB workshop

The Paper was taken as read and members noted that this report provides the opportunity to review all risks posed to the organisation and to consider key developments with the corporate risk profile. Ms Whitton highlighted:

- There are no risks to escalate as cause of concerns to the Committee for this Quarter.
- There has not been much movement in Risks since last report.
- The comments received at the last meeting about changing some scores have been reflected.
- **CCG-RR.3013**- There is now a system wide approach, collectively working together to reduce the costs to the system overall, rather than pushing costs around the system. This will lead to a greater system understanding of CCG costs / pressures (NLG only accounts for c40% of the CCGs budget).
- **CCG-RR.4021** - Lack of effective engagement from Council of Members (CoM) – following the refresh of the CCG constitution so only allowing voting rights to the clinical membership, rather than the Practice Managers. The attendance went down considerably. In addition Practices have the additional call on the GPs time linked to the setting up of the Primary Care Networks. This has led to a couple of the CoM meetings not being quorate. CoM Meetings have now changed to take place quarterly in order to be more productive and focussed on decision-making.
- **CCG-RR.4022**- IT service – This risk was largely down to the estates move from Athena to Muni whilst there have been some teething problems, it is largely resolved now.

The Committee provided the following feedback:

- **CCG-RR.3019**- New risk identified under Mental Health & DoLS - Ms Harris fed back

that this was with regards to the training aspects between the different organisations. This has been identified in the last 7 weeks and the position has improved considerably. The Governance Team are expecting that at the next review meeting they should hit the target but are going to leave it on the Risk Register for 3 months just for monitoring. This has been a lot of work due to new national guidance.

- **CCG-RR.2007** – Failure to manage residential care market – Mr Render queried if there was a link to that and the Ombudsman feedback about care home. It was noted that the two were not linked. A cost of care exercise is currently being undertaken to ensure providers are being paid a fair price. Mr Warner indicated that organisations are very reluctant to share their figures on pricing so it is very difficult to look at what is a fair price, the price point in the market is quite low. Dr Severin added that a care home should feel like a “nice family home” it should be a clean and caring happy place, but people are not taking ownership of that type of environment, there some good ones but not many.
- **CCG-RR.2012** - Patient Transport Services – members noted that the risk has gone down and queried the logic behind this? Ms Harris informed that TASL as a provider had significant risks in the system across the national scale, however contingency support plans are in place now should anything happen.
- **CCG- 3005** - ASC debt; The committee felt that the rating was high given that significant amounts of money have been recovered which is the most positive it's ever been **ACTION: Ms Whitton agreed to pick up with Rachel at her next 1:1.**
- Mr Render queried the review dates being more timely for this report as some of these were updated in May and we are now in July. Ms Harris informed that the review date is set from the date the risk goes on the register if the score is 15 it is updated every month if it is between 12-14 then it is reviewed bi-monthly. A score of 11 and below means it is reviewed quarterly.
- Mr Render queried **CCG-RR.2007** it seems the review date has passed at June 2019 and people need chasing up for responses. Ms Harris stated that it would escalate this time of year due to holiday periods. It was agreed that the senior leadership should chase up –people who have not responded **ACTION: OLT to pick this up to keep on top of them.**

LW

6. Annual SIRO Update

Mrs Jan Haxby attended the meeting to present the circulated report and to update on the work carried out by the Information Governance Team on behalf of the IG Steering Group to provide assurance on the controls in place relating to the IG standards and law.

The annual IG report submitted to the committee in March 2019 gave the committee the assurance for the year 2018 - 2019 that the CCG remains compliant with the required standards for IG (Information Governance) across all work areas and functions in line with mandatory and statutory obligations and NHS good practice

This report highlights areas of outstanding actions 2018-19 and to make the committee aware of forthcoming changes and requirements for 2019-20. Mrs Haxby thanked Mrs Stocks for producing the report for her.

Mrs Haxby highlighted the following points to the Committee:

- IT; It has been a large project transferring the staff over from Embed to NELC. Nearly all headquarters staff have now moved over, with only the Informatics staff and Continuing Health Care Team are still waiting. Work is ongoing on systems and processes for Systmone and Emis to ensure the right arrangements for sponsoring and checking smartcards.
- It has been quite an undertaking getting each of the systems to talk to each other.

- The CCGs Information Governance (IG) provision of services with Embed will end on 31 March 2020. The current concern around IG provision is sustainability as understandably the people in those roles are looking for elsewhere for employment. The CCG are working with Embed in trying ensure we do not lose the knowledge and previous history of our organisation. It was also noted that in 2020 CCGs will also be responsible for providing IG support to Primary Care, although we do not yet have all the detail, it is clear that there will not be any additional funding attached to this responsibility, so there is a potential risk on our ability to deliver that, and this will be a high Priority over the next 12 months.
- The Government have decided that CCGs should now have the same standards applied in the data protection tool kit as NHS foundation Trusts. NHS digital has reviewed this and it means another 30 compliance tasks for CCGs mainly around cyber attacks and purchasing new software. The CCG will have to meet them as it is not an option. The IG Steering group will monitor the plan and the Governing Body may have some additional responsibilities on data security as a result.
- NHS digital are putting on additional training for Governing Body members around Cyber Security. Ms Haxby also highlighted that all staff must complete the Data Security Awareness training, in the last few years it has proved difficult to get the high level Exec team and Board Members to complete it in a timely fashion. Mr Render advised that it would be helpful if the CCG could produce a timetable of when mandatory training is expected to be completed so people can plan to do it in a timely fashion. It was noted the target for completing the training is 98%. The 2% is taken up by people on maternity leave and long terms sick so there is no leeway for people to not complete it. **ACTION: J Harris/Governance Team to produce a forward timeline of mandatory training.**
- It was agreed that escalation of the additional requirements expected by the CCG should be taken to the Board. **ACTION: T Render.**
- It was noted that there needs to be further tests on data security to primary care and Ms Whitton will look across the STP to work with other CCGs and also NELC. **ACTION: L Whitton**

JH

TR

LW

7. Terms of Reference

As noted under Matters Arising these are still being reviewed. Members were asked if they had any other feedback? The only comment was that there was not enough lay members to make the meeting quorate on occasion and subsequently meetings having to be re-arranged.

8. Feedback from Committee member survey (in particular IG &AC)

Mr Render presented a paper showing the feedback from Committee Members in the CCG. There has been some changes made to some Committee remits such as HR has gone to the Exec team and Remuneration Committee instead of the IG & Audit.

Members were asked if they had any other feedback. Mrs Haxby queried why the Quality Committee and Clinical Governance Committee did not appear to be included in the questionnaire? Ms Whitton said she would ask Mrs C Stocks, as she was not sure. Mr Render asked for this feedback to go to each Committee for information/discussion. **ACTION: C Stocks/L Whitton**

9. Internal Audit

- **Progress Report**

Ms Baker and Ms Kendall took the paper circulated as read. The following points were highlighted to the Committee:

- Section 2 of the report shows that two reports were not completed in 18/19 and have

been deferred with the CCGs knowledge, they were Adult Social Care (ASC) Top-ups and Dementia.

- The ASC Top ups was deferred for very good reason, the outcome work requires more than one team to address issues and this work is ongoing.
- The Dementia audit involved key stakeholders Navigo and the Voluntary sector as well as the CCG. The lead for the programme work sits within Navigo, so some of the longer-term solutions around pathways and Systmone need to be elevated in the CCG. Ms Whitton queried why the lead sat with Navigo when it was a CCG audit. It was agreed that Ms Whitton and Ms Baker would have a separate conversation outside of this meeting. **ACTION: Ms Whitton to discuss with Ms Baker**
- Ms Kendall updated that the safeguarding audit has started.
- It was agreed that circulating reports as they arise would be a better way forward and then any issues can then be picked up at the following meeting.
- Mr Render highlighted that within the Internal audit report on page 6 the shared team needs to be NEL not NL. **ACTION: D Baker**

LW / DB

DB

10. External Audit Update

The final report from the 2018/19 Audit the Annual Audit Letter, intended for publication on the CCG web-site when finally agreed were presented to the Committee and taken as read.

The Audit strategy memorandum setting out the risks and the timing of the external audit work will be presented at the next meeting. **ACTION: R Walker**

RW

The Annual Audit Letter summarises the work Mazars have undertaken as the auditor for the CCG for the year ended 31 March 2019. Although this letter is addressed to the CCG, it is designed to be read by a wider audience including members of the public and other external stakeholders.

On page 5, section 2 of the report there are significant risks (consistent for all CCGs) which the external auditors must look at and evidence that management have not misrepresented the finances. The fact that the CCGs are membership organisations means there is an additional risk. There were no issues in the last financial year, this will be tested again next year and the plan will be brought to the next meeting. **ACTION: R Walker**

RW

An additional responsibility is ensuring value for money (VFM) this was an identified risk last year due to the difficult financial position across the system, but this is a shared risk and the CCGs cannot just shift cost pressures (the deficit) to NLaG, which is why the joint working together is crucial.

The fact that North East Lincs CCG has managed to balance its books for many years gives added assurance to the joint working.

Progress Report – Mr Walker informed that there will potentially be a piece of work on the Mental Health Standard. As soon as technical advice is received the trials will be able to start testing the system.

11. Adult Social Care – Aged Debt

A report was circulated to members to provide the committee with an update on the:-

- Year-end position 2018/19 31st March 19 (sales ledger and deferred payments {DPA's} - legal charges on property)
- Key achievements during the year; with overall debt being reduced. It was noted that a lot of the improvements have been due to getting the systems right in the first place. Mr Render extended his thanks to all the staff involved.

12. **Alliance Agreement (Copy of the Governing Body presentation)**
Ms Whitton informed that the Alliance Agreement is at a critical stage with the main issue being working though being what level of involvement Primary care will have with the alliance. The development of PCNs have moved the goalposts somewhat.

The agreement is 99% there, with a refresh on some services specification's. It should be in place by end of August with systems in place for patient flows and outcomes. The CCG will be looking at the baseline activity before the Alliance started and again in 6 months to see if it has made any difference. From Mazars perspective it shows real working together for value for money.

ACTION: Agenda - Bring back to December Meeting.

KS

13. **FOI Quarterly Report (Q4)**

The paper was taken as read and members noted that the performance in relation to responding within the timescales is still good.

A discussion took place around how huge the burden is, with ever more stretched resources we need to look at how we can reduce them further. There is as much information on the website as possible so we can direct people there.

14. **Finance Assurance Group Minutes**

The Minutes were noted for information

15. **Information Governance sub-committee Minutes**

The Minutes were noted for information.

16. **Schedule of any virtual decisions taken by the Committee**

- **Standing Order waivers**

Ms Whitton had circulated a paper detailing the Extension of existing contract with Serum Management to 30 Sept 2019. Serum Management provided Consultancy in 2018/19 for Delivery of the system aligned Operational Plan for 2019/2020 between North East Lincolnshire & Northern Lincolnshire and Goole NHS Foundation Trust.

Given the focus of the required work in 2019/20 and the work done by Serum Management in 2018/19 it made sense to continue to use Serum Management in 2019/20. It was clarified that the cost was £46,000 + VAT.

17. **Ratification of Policies**

Members took the paper as read and noted details of the CCG policies that have been virtually ratified since the last report.

Mr Render tasked Ms Harris with producing a timetable of when they are due for review, so that each Committee will have an indication of how many are due and can monitor these.

ACTION: J Harris to look at review dates for all polices and produce a table for each Committee

JH

18. **Independent Assurance Reports**

- NHSLA Assessment (Claims) Report – nothing to report
- Findings of any Ombudsman Investigation in relation to the CCG or its services

Members noted the paper circulated. Mr Render queried if there any learning for the CCG from this Ombudsman report? Mr Warner informed that FOCUS have a monthly joint meeting

with the CCG where they go through them and look at the wider implications and learning. They also look at other ombudsmen's decisions from other areas to see if we can learn from them also, not just ours.

- Determination of any Tribunal held in relation to the CCG – nothing to report

19. Issues for Escalation to the Board

- COI Training Board members who have not yet completed

20. Any Other Business

None raised.

21. Date and Time of Next Meeting:

Friday 6th September 2019

9-11am

Crosland Suite, Grimsby Town Hall, Grimsby